

METHOD TO DEFINE ADULTS WITH SPMI

PURPOSE: To insure that adults with Severe and Persistent Mental Illness (SPMI), or who are most at risk of developing SPMI, are promptly and accurately identified.

To insure that those most in need are offered the full array of community- based mental health services necessary to successfully manage their illness, support their recovery process, and live meaningful lives in their community.

APPROACH: Apply two main areas of assessment to determine an individual's status as meeting criteria for SPMI: (1) diagnostic criteria, and (2) functional and risk criteria.

STEP ONE: Apply diagnostic criteria to determine an individual's identification as meeting initial criteria for the Community Support Services (CSS) target population. To meet diagnostic criteria for SPMI, individuals must be assessed to determine whether they have a principle diagnosis in either Category A or Category B not solely related to an intellectual/developmental disability or induced by a substance.

Category A Diagnoses:

- 295.70 **(F25.0)** Schizoaffective Disorder, Bipolar type
- (F25.1)** Schizoaffective Disorder, Depressive type
- 295.90 **(F20.9)** Schizophrenia
- 296.34 **(F33.3)** Major Depressive Disorder, Recurrent, Severe, with Psychotic Features
- 296.44 **(F31.2)** Bipolar I disorder, most recent episode (or current) manic, severe, specified as with psychotic behavior
- 296.54 **(F31.5)** Bipolar I disorder, most recent episode (or current) depressed, specified as with psychotic behavior
- 298.9 **(F28)** Other Specified Schizophrenia Spectrum and Other Psychotic Disorder

Category B Diagnoses:

All Other Bipolar I Disorders, moderate to severe not listed in Category A: **(F31.12) (F31.13) (F31.32) (F31.4)**

- 296.23 **(F32.2)** Major Depressive Disorder, Single Episode, Severe
- 296.24 **(F32.3)** Major Depressive Disorder, Single Episode, With Psychotic Features
- 296.32 **(F33.1)** Major Depressive Disorder, Recurrent, Moderate
- 296.43 **(F33.2)** Major Depressive Disorder, Recurrent, Severe, Without Psychotic Features
- 296.35 **(F33.41)** Major Depressive Disorder, Recurrent, In Partial Remission

- 296.89 **(F31.81)** Bipolar II Disorder
- 297.10 **(F22)** Delusional Disorder
- 300.01 **(F41.0)** Panic Disorder
- 300.22 **(F40.00)** Agoraphobia
- 300.3 **(F42)** Obsessive-Compulsive Disorder
- 300.3 **(F42)** Hoarding Disorder
- 301.83 **(F60.3)** Borderline Personality Disorder
- 309.81 **(F43.10)** Posttraumatic Stress Disorder

Category C Diagnoses: Removed

STEP TWO: To meet functional criteria for SPMI, persons with a primary diagnosis in Category A or B must, as a result of their qualifying diagnosis, demonstrate impaired functioning through use of the following assessment. For those with a primary diagnosis in Category A who **do** meet the functional criteria listed below, no further assessment is needed to determine eligibility for CSS. Those with a primary diagnosis in Category B must meet these criteria as well as criteria outlined in Step 3.

Impaired functioning¹ is evidenced by meeting at least one (1) of the first three criteria, **and** at least three (3) of the criteria numbered 4 through 9 that have occurred on either a continuous or intermittent basis over the last two years:

- ☐ 1. Required inpatient hospitalization for psychiatric care and treatment more intensive than outpatient care at least once in her/his lifetime;
 - ☐ 2. Experienced at least one episode of disability requiring continuous, structured supportive residential care, lasting for at least two months (e.g. a nursing facility, group home, half-way house, residential mental health treatment in a state correctional facility);
 - ☐ 3. Experienced at least one episode of disability requiring continuous, structured supportive care, lasting at least two months, where the family, significant other or friend of the consumer provided this level of care in lieu of the consumer entering formalized institutional services. (In this case, the Qualified Mental Health Professional (QMHP) must fully document the consumer's level of severe disability and lack of functioning that required the family or other person to provide this level of care).
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- ☐ 4. Has been unemployed, employed in a sheltered setting, or has markedly limited skills and a poor work history;
 - ☐ 5. Requires public financial assistance for their out-of-institutional maintenance and is unable to procure such financial assistance without help;
 - ☐ 6. Shows severe inability to establish or maintain a personal support system, evidenced by extreme withdrawal and social isolation;

¹ Adults that would have met functional impairment criteria during the referenced time period without the benefit of treatment or other support services are included here.

- ☐ 7. Requires help in instrumental activities of daily living such as shopping, meal preparation, laundry, basic housekeeping, and money management;
- ☐ 8. Requires help in attending to basic health care regarding hygiene, grooming, nutrition, medical and dental care, and taking medications. *(Note: this refers to the lack of a basic skill to accomplish the task, not to the appropriateness of dress, meal choices, or personal hygiene);*
- ☐ 9. Exhibits inappropriate social behavior not easily tolerated in the community, which results in demand for intervention by the mental health or judicial systems (e.g. screaming, self-abusive acts, inappropriate sexual behavior, verbal harassment of others, physical violence toward others).

STEP THREE: Risk Assessment

DIRECTIONS: For each item listed below: (1) determine with the person being assessed whether the item applies to her/his life situation; (2) circle the correct number for the item, based on the time period that applies; and (3) enter the number in the box labeled "Score".

Risk Factor	<u>Circle a number if the item applies</u>		<u>Score</u>
	Within the past 30 days	Between 31 and 180 days	
1. Has been discharged from inpatient psychiatric hospitalization.	5	3	
2. History of suicide attempts/life threatening self harm	5	5	
3. Documented threats of physical harm to others without follow through	2	1	
4. Has been released from jail or prison due to a crime involving physical harm to self or others that was related to psychiatric symptoms	3	1	
5. Experienced severe to extreme impairment due to physical health status (Impairment may be due to chronic health problems and/or frequency and severity of acute illnesses)	2	1	
6. Experienced severe to extreme impairment in thought processes (as evidenced by symptoms such as hallucinations, delusions, tangentiality, loose associations, response latencies, incoherence)	5	3	
7. Experienced moderate to severe impairment due to use of drugs and/or alcohol.	3	2	
8. Experienced severe to extreme impairment due to significantly insufficient finances and/or access to healthcare.	3	2	
9. Experienced severe to extreme impairment due to significant loss of or conflict with primary support group member(s).	3	2	
10. History of activity of self-mutilating behavior	3	2	

NOTE: You may mark only <u>ONE</u> of the following housing statuses, if one applies:	Within the past 30 days	Between 31 and 180 days	<u>Score</u>
11. Currently homeless or had an incident of homelessness (defined as lack of an overnight, fixed address resulting in sleeping in places not fit for human habitation, i.e. streets, cars, etc., or sleeping in a homeless shelter) Meets the HUD definition of homelessness.	4	2	
12. Currently residing in a RCF or has resided in an RCF (RCF's are state-licensed Residential Care Facilities providing congregate living to adults with mental illness. These include Nursing Facilities for Mental Health, group homes, Adult Care Homes, etc.)	3	1	
13. Currently at imminent risk of homelessness (reference current HUD definition) and/or placement in an RCF.	2	1	
	TOTAL SCORE:		

Circle Score:

12 or higher

11 or less

Risk Assignment:

High Risk

Low Risk

CSS Eligibility Status:

YES

NO

This tool is meant as a screening device, not the final and only assessment of risk. Should a worker or consumer rank him/her at a higher level of risk than is indicated, the score should be changed to reflect that level of risk and the change and rationale for it be documented below:
